

**FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

10/567770

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED

**AFTER
1ST AMENDMENT**

**AFTER
2ND AMENDMENT**

	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3			1			
4				1		
5			1			
6				1		
7				1		
8				1		
9				1		
10				1		
11				1		
12				1		
13				1		
14				1		
15				1		
16				1		
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18				1		
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20	1		1			
21				1		
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23				1		
24				1		
25				1		
26				1		
27				1		
28				1		
29				1		
30				1		
31				1		
32				1		
33	(1)			1		
34				1		
35				1		
36				1		
37				1		
38				1		
39				1		
40				1		
41				1		
42				1		
43				1		
44				1		
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		

TOTAL IND.

3

TOTAL DEP.

29

TOTAL CLAIMS

32

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						

TOTAL IND.

3

TOTAL DEP.

29

TOTAL CLAIMS

32